PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

379.348USZ

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY		
TOTAL CLAIMS			20					RATE	FEE'	}	RATE	FEE	
FC	DR .		NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TC	TAL CHARGE	ABLE CLAIMS	20 minus 20=		• 2			X\$ 9=		OR	X\$18=		
INE	DEPENDENT C	LAIMS	2 mi	inus 3 =	• 0	_		X43=		OR	X86=		
ML	JLTIPLE DEPEN	NDENT CLAIM P	RESENT	 .				+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2						column 2		TOTAL		OR	TOTAL	770	
CLAIMS AS AMENDED - PART II								OTHER THAN					
(Column 1)				(Column 2)) 7 F	SMALL		OR	SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT	-	NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= ·] [X\$ 9=		OR	X\$18=		
	Independent	*	Minus	PENIDENT	CLAIM	-	[X43=		OR	X86=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=		
							L ^	TOTAL DDIT. FEE	,	OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colum	nn 2)	(Column 3)		DD11.1 LL					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=]	X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=		
							L	TOTAL		OR	TOTAL		
		:	•					DDIT. FEE L		Ųп ,	ADDIT. FEE		
	_	(Column 1) CLAIMS		(Colum		(Column 3)	1 -	· · · · · · · · · · · · · · · · · · ·				· ·	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		ام	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +14									OR			
• H	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=	·	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."]	ÒR ,	TOTAL ODIT. FEE		
	The "Highest Num	ber Previously Paid	For (Total or	Independe	ht) is the	highest numbe	er foun	d in the appr	opriate box	in coli	ımn 1.	. [